## PART B - FEE(S) TRANSMITTAL

end this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

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7590

03/08/2006

DAVIDSON, DAVIDSON & KAPPEL, LLC 14th Floor 485 Seventh Avenue New York, NY 10018

06/06/2006 EFLORES1 00000008 10692662

01 FC:1501 02 FC:1504 03 FC: APPLICATION NO. 1400.00 DP

300.00 OP

FILING DATE OF

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

Marina Krioutchkova

**V**2006

CONFIRMATION NO.

(Date

(Depositor's name)

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10/692,662

10/24/2003

F. Peter Boer

208.1007US

9936

TITLE OF INVENTION: ANALOGS AND PRODRUGS OF BUPRENORPHINE

APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE	TOTAL FEE(S) DUE DATE DUE \$1700-\$1730 06/08/2006		DATE DUE
nonprovisional	NO	\$1400		\$300			06/08/2006
EXAM	MINER	ART UN	IT	CLASS-SUBCLASS	]		
DAVIS, ZINNA	NORTHINGTON	1625		514-279000			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.</li> </ol>		ee Address" (37	1			David	son,
		Correspondence			·	Davids	on and
		ation form e of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Zerogistered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME ANI	D RESIDENCE DATA TO E	E PRINTED ON T	HE PATEN	Γ (print or type)			
PLEASE NOTE: Unles recordation as set forth i	s an assignee is identified b n 37 CFR 3.11. Completion	clow, no assignee of this form is NOT	data will app Γa substitute	ear on the patent. If an assign for filing an assignment.	ee is identifie	d below, the d	ocument has been filed for
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EURO-CELTI	QUE S.A.		Luxe	embourg, Luxembou	ırg		
Please check the appropriat	e assignee category or catego	ries (will not be pri	inted on the p	patent): 🔲 Individual 🛛 C	orporation or c	other private gr	oup entity Government
			inted on the p		orporation or c	other private gr	oup entity Government
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4a. The following fee(s) are		4b	Payment of A check	Fee(s): in the amount of the fee(s) is er by credit card. Form PTO-203:	nclosed. 8 is attached.		
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4a. The following fee(s) are  Issue Fee  Publication Fee (No  Advance Order - # of  Change in Entity Status  a. Applicant claims S	e enclosed: small entity discount permitt of Copies  from status indicated above SMALL ENTITY status. See	4b ed) ::) 37 CFR 1.27.	D. Payment of  A check Payment The Dire Deposit  b. Applition Fee (if a difform anyon Office.	Fee(s): in the amount of the fee(s) is end by credit card. Form PTO-203: ctor is hereby authorized by chaccount Number 50-0352 cant is no longer claiming SMA my) or to re-apply any previous e other than the applicant; a reg	aclosed.  8 is attached.  arge the require	ed fee(s), or creenclose an extraction that is see 37 Core to the application or the second s	edit any overpayment, to ra copy of this form).  FR 1.27(g)(2).

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